



Agency for Healthcare Research and Quality
Advancing Excellence in Health Care



NATIONAL
QUALITY MEASURES
CLEARINGHOUSE

General

Title

Perioperative protocol: percentage of surgical cases where counts were not reconciled and imaging was performed.

Source(s)

Card R, Sawyer M, Degnan B, Harder K, Kemper J, Marshall M, Matteson M, Roemer R, Schuller-Bebus G, Swanson C, Stultz J, Sypura W, Terrell C, Varela N. Perioperative protocol. Health care protocol. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2014 Mar. 124 p. [124 references]

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of surgical cases where counts were not reconciled and imaging was performed.

Rationale

The priority aim addressed by this measure is to improve the adherence of the key components of the perioperative protocol.

Evidence for Rationale

Card R, Sawyer M, Degnan B, Harder K, Kemper J, Marshall M, Matteson M, Roemer R, Schuller-Bebus G,

Primary Health Components

Perioperative protocol; surgical counts; imaging

Denominator Description

Total number of surgical cases (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Number of surgical cases where counts were not reconciled and imaging was performed

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

Unspecified

National Guideline Clearinghouse Link

Perioperative protocol. Health care protocol.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory Procedure/Imaging Center

Hospital Inpatient

Hospital Outpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Specified

Target Population Age

All ages

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Health and Well-being of Communities

Making Care Safer

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Getting Better

Staying Healthy

IOM Domain

Effectiveness

Safety

Data Collection for the Measure

Case Finding Period

The time frame pertaining to data collection is monthly.

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

Total number of surgical cases

Population Definition: Patients of all ages who have a surgical procedure performed.

Data Collection: Retrospective collection of any measures associated with documentation can be done by randomly sampling charts of patient cases.

Concurrently, collection will need to be done through direct observation either by a quality/safety advocate or "secret shopper," someone who has a dual function on the team but whose observation and measurement function is not known.

Exclusions

Unspecified

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of surgical cases where counts were not reconciled and imaging was performed

Exclusions

Unspecified

Numerator Search Strategy

Institutionalization

Data Source

Paper medical record

Other

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Identifying Information

Original Title

Percentage of surgical cases where counts were not reconciled and imaging was performed.

Measure Collection Name

Perioperative Protocol

Submitter

Institute for Clinical Systems Improvement - Nonprofit Organization

Developer

Institute for Clinical Systems Improvement - Nonprofit Organization

Funding Source(s)

The Institute for Clinical Systems Improvement's (ICSI's) work is funded by the annual dues of the member medical groups and five sponsoring health plans in Minnesota and Wisconsin.

Composition of the Group that Developed the Measure

Work Group Members: Randall Card, MD (*Work Group Leader*) (Cuyuna Regional Medical Center) (Family Medicine); Mark Sawyer, MD (*Work Group Leader*) (Mayo Clinic) (Trauma and Emergency Surgery); William Sypura, MD (Fairview Health Services) (Family Medicine); Mary Matteson, RN, BA (Gillette Children's Specialty Healthcare) (Surgery); Gwen E. Schuller-Bebus, RN, MA (Gillette Children's Specialty Healthcare) (Surgery); Cheryl Swanson (Gillette Children's Specialty Healthcare) (Patient Safety and Quality); Jerry Stultz, MD (HealthPartners Medical Group and Regions Hospital) (Pediatrics); Rebekah Roemer, PharmD, BCPS (Park Nicollet Health Services) (Pharmacy); Kathleen Harder, PhD (University of Minnesota) (Human Factors Content Consultant); Carrie Terrell, MD (University of Minnesota) (OB/GYN); Nicole Varela, MD (Winona Health) (Anesthesiology); Barb Degnan, RN, BSN (Patient Representative); Jill Kemper, MA (Institute for Clinical Systems Improvement [ICSI]) (Project Manager); Melissa Marshall, MBA (ICSI) (Project Manager)

Financial Disclosures/Other Potential Conflicts of Interest

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The complete ICSI policy regarding Conflicts of Interest is available at the [ICSI Web site](#)

Disclosure of Potential Conflicts of Interest

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Financial/Non-Financial Conflicts of Interest: Reviewed image charts for TREC Med information retrieval

project through Oregon Health and Science University

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ACOG Advisory Committee

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Research Grants: None

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Research Grants: None

Financial/Non-Financial Conflicts of Interest: None

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2014 Mar

Measure Maintenance

Scientific documents are revised every 12 to 24 months as indicated by changes in clinical practice and literature.

Date of Next Anticipated Revision

The next scheduled revision will occur within 24 months.

Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in January 2016.

Measure Availability

Source available for purchase from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#)

. Also available to ICSI members for free at the [ICSI Web site](#)

and to Minnesota health care organizations free by request at the [ICSI Web site](#)

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NQMC Status

This NQMC summary was completed by ECRI Institute on November 3, 2014.

The information was reaffirmed by the measure developer on January 13, 2016.

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Production

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